OMB APPROVAL FORM D **UNITED STATES** OMB Number: 3235-0076 Expires: May 31, 2005 SECURITIES AND EXCHANGE COMMISSION Estimated average burden Washington, D.C. 20549 hours per response: 16.00 FORM D NOTICE OF SALE OF SECURITIES SEC USE ONLY 2004 PURSUANT TO REGULATION D. Prefix Serial SECTION 4(6), AND/OR DATE RECEIVED UNIFORM LIMITED OFFERING EXEMPTION Name of Offering (check if this is an amendment and name has changed, and indicate change.) Goldman Sachs Global Equity Long/Short II, LLC: Units of Limited Liability Company Interests Filing Under (Check box(es) that apply): Rule 504 ☐ Rule 505 ☑ Rule 506 Type of Filing: □ New Filing ☑ Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Goldman Sachs Global Equity Long/Short II, LLC Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (including Area Code) c/o Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey (609) 497-5500 08540 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business To operate as a private investment fund. Type of Business Organization ☐ corporation ☐ limited partnership, already formed ☐ limited partnership, to be formed Limited Liability Company ☐ business trust Month Year Actual or Estimated Date of Incorporation or Organization: 0 4 0 4 ☑ Actual ☐ Estimated (Enter two-letter U.S. Postal Service abbreviation for Jurisdiction of Incorporation or Organization: State: CN for Canada; FN for other foreign jurisdiction) D E **GENERAL INSTRUCTIONS** Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2. Ent	er the information requ	iested for the follow	ving:						
*	Each promoter of the	issuer, if the issuer	has been organized v	vithir	the past five years;				
*	* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;								
*	Each executive office	er and director of co	orporate issuers and of	corr	orate general and ma	anagii	ng partners	of na	rtnership issuers: and
*			•	001 P	orate general and m		is purificit	or pa	micromp issuers, and
	Each general and ma			_	T O.C.	_	D: .		
Спеск в	Box(es) that Apply:	☑ Promoter □	Beneficial Owner	Ц	Executive Officer	ш	Director		General and/or Managing Partner*
Full Na	me (Last name first, if i	ndividual)							
Goldma	n Sachs Princeton LI	C (the Issuer's Ma	anaging Member)						
Busines	s or Residence Address	s (Number and St	reet, City, State, Zip (Code)				
701 Mo	unt Lucas Road, Prin	ceton, New Jersey	08540						
Check E	Box(es) that Apply:	□ Promoter □	Beneficial Owner		Executive Officer *of the Issuer's M	_		_	General and/or Managing Partner
Full Na	me (Last name first, if i	ndividual)		. <u>6</u> 5 1					
Clark,	Kent A.		7 And 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	389 pt.					
	s or Residence Address		reet, City, State, Zip (
	dman Sachs Princeton	LLC, 701 Mount	Lucas Road, Princet	on, N	New Jersey 08540		· -		
Check E	Box(es) that Apply:	☐ Promoter ☐	Beneficial Owner		Executive Officer the Issuer's Managi		Director* ember		General and/or Managing Partner
Full Na	me (Last name first, if i	individual)							
Lawson	, Hugh J.								
Busines	s or Residence Address	s (Number and St	reet, City, State, Zip (Code)				
c/o Gol	dman Sachs Princeton	LLC, 701 Mount	Lucas Road, Princet	on, N	New Jersey 08540				
Check I	Box(es) that Apply:	□ Promoter □	Beneficial Owner		Executive Officer *of the Issuer's Man		Director* g Member		General and/or Managing Partner
Full Na Levy, T	me (Last name first, if i obin V.	ndividual)							
Busines	s or Residence Address	s (Number and St	reet, City, State, Zip (Code)				
c/o Gol	dman Sachs Princetor	LLC, 701 Mount	Lucas Road, Princet	on, N	New Jersey 08540				
Check I	Box(es) that Apply:	☐ Promoter ☐	Beneficial Owner		Executive Officer *of the Issuer's Ma		Director* ng Membe		General and/or Managing Partner
Full Na	me (Last name first, if i	individual)							
Walker	, George H.		····						
Busines	s or Residence Address	s (Number and St	treet, City, State, Zip (Code)				
c/o Gol	dman Sachs Princetor	LLC, 701 Mount	Lucas Road, Princet	on, N	New Jersey 08540				
Check I	Box(es) that Apply:	☐ Promoter ☐	Beneficial Owner		Executive Officer of the Issuer's Manag		Director Iember		General and/or Managing Partner
Full Na	me (Last name first, if i	individual)							
Gall, N	atalie M.		<u> </u>						
Busines	s or Residence Address	s (Number and St	treet, City, State, Zip	Code)				
c/o Gol	dman Sachs Princetor	LLC, 701 Mount	Lucas Road, Princet	on, N	New Jersey 08540		<u> </u>		
Check I	Box(es) that Apply:	☐ Promoter ☐	Beneficial Owner		Executive Officer* of the Issuer's Mana		Director Member		General and/or Managing Partner
Full Na	me (Last name first, if	individual)							
Judge,	Karen M.								
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Gol	dman Sachs Princetor								
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)									

A. BASIC IDENTIFICATION DATA

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2.	Enter the information requested for the following:	
	* Each promoter of the issuer, if the issuer has been organized within the past five years;	
	* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;	ès
	* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and	
	* Each general and managing partner of partnership issuers.	
Che	ck Box(es) that Apply:	
Ful	Name (Last name first, if individual)	
Kie	ko, Janice A.	
	iness or Residence Address (Number and Street, City, State, Zip Code)	
c/o	Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540	
Ch	ck Box(es) that Apply:	
Ful	Name (Last name first, if individual)	
Bu	iness or Residence Address (Number and Street, City, State, Zip Code)	
Ch	ck Box(es) that Apply:	
Ful	Name (Last name first, if individual)	
Bu	iness or Residence Address (Number and Street, City, State, Zip Code)	
Ch	ck Box(es) that Apply:	
Ful	Name (Last name first, if individual)	
Bu	iness or Residence Address (Number and Street, City, State, Zip Code)	
Ch	ck Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Ful	Name (Last name first, if individual)	
Bu	iness or Residence Address (Number and Street, City, State, Zip Code)	
	(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)	_

A. BASIC IDENTIFICATION DATA

				B. INI	ORMAT	ION ABO	UT OFFI	ERING					
											Yes	No	
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?													
			А	nswer also	in Appendi	x, Column	2, if filing u	inder ULOE	i.				
2. What is the minimum investment that will be accepted from any individual?										\$1,000,000*			
*The Managing Member at its discretion may accept subscriptions for lesser amounts. 3. Does the offering permit joint ownership of a single unit?										Yes ☑	No		
4. Enter t	the informat	tion reaues	ted for each	n person w	ho has beer	n or will be	e paid or gi	iven, direct	v or indire	ctly, any			
commi If a per or state	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
		· ·		nformation	for that bro	ker or deale	r only.						
Full Name (Last name first, if individual)													
	Sachs & C												
Business o	r Residence	: Address (N	Number and	Street, City	, State, Zip	Code)							
85 Broad	Street, New	York, Nev	w York 100	04									
Name of A	ssociated B	roker or De	aler										
	Vhich Perso					rchasers				 			
(Check "A	All States" c	or check ind	lividual Stat	•					••••••		🗹 A	ll States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name	(Last name	first, if ind	ividual)										
Business o	r Residence	Address (N	Number and	Street, City	, State, Zip	Code)							
Name of A	ssociated B	roker or De	ealer										
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers							
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[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name	(Last name	first, if ind	ividual)										
Business o	r Residence	Address (1	Number and	Street, City	, State, Zip	Code)							
Name of A	ssociated B	roker or De	ealer										
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers							
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[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price			Amount Already Sold
	Debt	\$_	0	_ \$	_	0
	Equity (Limited Liability Company Units)	\$_		\$	_	
	☐ Common ☐ Preferred					
	Convertible Securities (including warrants)	\$_	0	_ \$	_	0
	Partnership Interests	\$_	0	_ \$	_	0
	Other (Specify) Units of Limited Liability Company Interests	\$_	29,536,649	_ \$	_	29,536,649
	Total	\$	29,536,649	\$		29,536,649
	Answer also in Appendix, Column 3, if filing under ULOE.	_		_		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					Aggregate
			Number Investors			Aggregate Dollar Amount of Purchases
	Accredited Investors	_	20	_ \$	·	29,536,649
	Non-accredited Investors	_	0	_ \$		0
	Total (for filings under Rule 504 only)	_	N/A	_ \$		N/A
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of			Dollar Amount
	Type of offering		Security			Sold
	Rule 505	_	N/A	- \$	_	N/A
	Regulation A	_	N/A	_ \$	_	N/A
	Rule 504	_	N/A	_ \$		N/A
	Total		N/A	_ \$	_	N/A
tl tl	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			1 \$	·	0
	Printing and Engraving Costs			l \$	·	0
	Legal Fees		₽	[\$,	65,466
	Accounting Fees		Ε	l \$. 0
	Engineering Fees			i \$		0
	Sales Commissions (specify finders' fees separately)		R	i \$		88,610
	Other Expenses (identify)			1 \$		0
	Total		E	1 \$; _	154,076

C. OFFERING PRICE	NUMBER OF INVESTORS, EX	PENS	ES A	ND USE OF PR	COCE	EDS	
 b. Enter the difference between the agg Question 1 and total expenses furnish difference is the "adjusted gross proceeds" 	ed in response to Part C - Question 4.a	a. Th	is		\$_		29,382,573
. Indicate below the amount of the adjuste to be used for each of the purposes show furnish an estimate and check the box payments listed must equal the adjusted to Part C - Question 4.b. above.							
				Payments to Officers, Directors, & Affiliates			Payments To Others
Salaries and Fees			\$ _	0		\$_	0
Purchase of real estate			\$_	0		\$_	0
Purchase, rental or leasing and installatio	n of machinery and equipment		\$_	0		\$_	0
Construction or leasing of plant buildings	and facilities		\$_	0		\$_	0
Acquisition of other businesses (including this offering that may be used in exchanother issuer pursuant to a merger)		\$	0		\$	0	
Repayment of indebtedness			\$	0		\$	0
Working capital			\$	0		\$	0
Other (specify): Investment Capital			· - \$	0	. <u>–</u>	\$ — \$	29,382,573
Column Totals		* - \$. – Ø	* — \$	29,382,573	
Total Payments Listed (column totals add	•••••	_	☑ \$29,382,573				
	D. FEDERAL SIGNATU	RE	1.	A	i		· · · · · · · · · · · · · · · · · · ·
The issuer has duly caused this notice to lead to following signature constitutes an undertakt of its staff, the information furnished by the	ng by the issuer to furnish to the U.S. S	ecurit	ies an	d Exchange Comn	nission,	upon	
ssuer (Print or Type) Goldman Sachs Global Equity Long/Short I LC	II, Signature Matalie Ul- All	P		Date July 12, 2004			
Name of Signer (Print or Type)	Title of Signer (Print or Type)						
Natalie M. Gall	Vice President of the Issuer's Mana	aging	Mem	ber			
	<u></u>						

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).